STATEMENT OF

FORM 1	ORGANIZ (See instruc			Office use only
1. NAME OF COMMITTEE (in	(Check if name full) is changed)	Example: If typying, ty	12FE4M5	Office discounty
Cracker Barre	Old Country Store, Inc. PAC			
ADDRESS (number and	307 Hartmann Dri	<u> </u>	<u> </u>	
(Check if address is changed)	PO Box 787			
	Lebanon		L TN [37088 0787
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one			
(Check if address is changed)	psheehy@cracker	barrel.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)	s <u> </u>	<u> </u>	<u> </u>	11111111
2. DATE 1.2				
3. FEC IDENTIFICA	TION NUMBER	C C00252791		
4. IS THIS STATEM	NEW (N) OF	X AMENDED	(A)	
I certify that I have exam	ned this Statement and to the best of my	knowledge and belief it is true, c	orrect and complete	
Type or Print Name of	Treasurer Mr. Charlie Au	ıstin		
Signature of Treasurer	Electronically Filed by Mr. Cha	arlie Austin	Date 1 2	/ 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information ANY CHANGE IN INFOR	may subject the person signing	•	
Office Use Only		For further infor Federal Election (Toll Free 800-424	Commission I-9530	FEC FORM 1 (Revised 02/2009)